

CHAPTER 5. MEDICAL, CHEMICAL, BIOLOGICAL, RADIOLOGICAL, AND NUCLEAR DEFENSE MATERIEL (MCBRNDM)

5-1. INTRODUCTION

a. The Medical Chemical, Biological, Radiological, and Nuclear Defense Materiel (MCBRNDM) program enhances the Army's Medical readiness by fielding medical countermeasures used in the pretreatment and treatment to the individual soldier caused by CBRN agents. These countermeasures include:

- (1) Biological antibiotics
- (2) Chemical antidotes
- (3) Chemical pre-treatments
- (4) Skin protectants against chemical agents
- (5) Potency and Dated items for Medical Equipment Set, Chemical Agent Patient Treatment
- (6) Radiological protectants or therapeutics
- (7) Other medical CBRN materiel countermeasures

b. The MCBRNDM program is divided into three different programs based on funding and management.

(1) Deployable Force Package (DFP). This program was started in 1994 when the Department of the Army (DA), through the Office of The Surgeon General (OTSG), directed the USAMMA to centrally manage the initial issue of Individual Service Member (ISM) MCBRNDM required for deploying and forward deployed forces.

(a) DFP Sets are stored in strategic locations throughout the world (Table 5-1). The DFP materiel will support the initial stages of a contingency while allowing the industrial base adequate time to move into full production. USAMMA tracks each item of the DFP by lot number and expiration date and uses the information to budget and requisition for replacement materiel. DFP provides the initial issue to ISMs, which consists of the items listed in (Table 5-2).

TABLE 5-1. DFP LOCATIONS

| | | |
|--|-----------------------|----------------------|
| 16 th MEDLOG; Sagami, Japan | Fort Hood, TX | Fort Polk, LA |
| Camp Atterbury, IN | Fort Huachuca, AZ | Fort Riley, KS |
| Fort Belvoir, VA | Fort Irwin, CA | Fort Rucker, AL |
| Fort Benning, GA | Fort Jackson, SC | Fort Sam Houston, TX |
| Fort Bliss, TX | Fort Knox, KY | Fort Sill, OK |
| Fort Bragg, NC | Kuwait | Fort Stewart, GA |
| Fort Campbell, KY | Fort Lee, VA | Tripler AMC, HI |
| Fort Carson, CO | Fort Leonard Wood, MO | USAMMCE, Germany |
| Fort Drum, NY | Fort Lewis, WA | Fort Wainwright, AK |
| Fort Eustis, VA | Fort McCoy, WI | Walter Reed AMC, DC |
| Fort Gordon, GA | Fort Meade, MD | |

TABLE 5-2. DFP COMPONENTS

| NSN | ITEM | BASIS OF ISSUE |
|---|---|-----------------------------|
| 6505-01-174-9919 Or 6505-01-362-7427 | Antidote Treatment Kit Nerve Agent (Mark I Kits or Nerve Agent Antidote Kit – NAAK) Item consists of (1) Atropine and (1) 2-Pam Chloride Antidote Treatment - Nerve Agent Antidote (ATNAA) This item will replace the MARK 1 kit on a one-for-one basis. *See Footnote for the ATNAA Interim Doctrine | 3 per individual |
| 6505-01-274-0951 | Diazepam Injection 5 mg/ml 2ml, Syringe Needle Unit (Convulsant Antidote Nerve Agent - CANA) | 1 per individual |
| 6505-01-178-7903 | Pyridostigmine Bromide Tablets 30 mg 210 tablets/package (PBT or Nerve Agent Pretreatment Pyridostigmine - NAPP) SSA/MTF will not issue PBT unless authorized by OTSG. | 42 tabs per individual |
| Antibiotics: 6505-01-491-5506 Or 6505-01-491-2834 Or 6505-01-529-6640 | Doxycycline 100 mg tablets, 30's (U/I: BT) Ciprofloxacin 500 mg tablets, 30's (U/I: PG) Ciprofloxacin 500 mg tablets, 30's (U/I: BT) NOTE: Doxycycline will be issued unless there is a specific requirement for Ciprofloxacin | 15 days of supply = 30 tabs |
| 7610-01-492-7703 | Soldier's (Individual's) Guide to MBCDM | 1 per individual |
| 6505-01-483-7162 | Skin Exposure Reduction Paste Against Chemical Warfare Agents (SERPACWA) Each packet contains 1 oz. and weighs 2.7 oz. SSA/MTF will not issue SERPACWA unless authorized by OTSG. * See Footnote for the SERPACWA Interim Doctrine. | 6 per individual |
| 6505-01-496-4916 | Potassium Iodide (KI) tablets, 14 tablets, strip. Contingency stockage maintained at selected DFPs. SSA/MTF will not issue KI unless authorized by OTSG. | 14 tablets per individual |
| <p>*The interim doctrine for the application and use of SERPACWA and ATNAA is provided at the following website: https://acfi.amedd.army.mil/dcdd (Directorate of Combat and Doctrine, United States Army Medical Center and School, Fort Sam Houston, Texas).</p> <p>Double click on the eagle to enter the website. On the blue index on the left side of the screen, select "Drafts" and double click; scroll down the page to Interim Doctrine, then select the desired document. An Army Knowledge Online (AKO) account is required to access this website.</p> <p>If you have difficulty accessing the website, send an email to Medicaldoctrine@amedd.army.mil or call commercial 210-221-9524 or DSN 471-9524.</p> | | |

(b) OTSG programs funding for replenishment of MCBRNDM for all DFPs, based on the 1-4-2-1 force sizing construct, through the Health Services Chemical and Biological (HSCB) Management Decision Package (MDEP). Supply Support Activity (SSAs)/Medical Treatment Facility (MTFs) will maintain and account for assets as contingency stock and release them at no cost when authorized by OTSG.

(2) Medical Equipment Set (MES), Chemical Agent Patient Treatment. In FY02 the OTSG and the USAMMA began centralized funding and management of the Potency and Dated (P&D) items that are part of the MES Chemical Agent Patient Treatment, LIN M23673. These items, listed in Table 5-3, will be centrally stored at the installation level. The blowers/accessories required for the Chemical Patient Wrap will be centrally funded when the new wrap is available (Table 5-4).

TABLE 5-3. P&Ds FOR MES, CHEMICAL AGENT PATIENT TREATMENT, LIN M23673

| NSN | ITEM | BASIS OF ISSUE |
|------------------|---|----------------|
| 6505-00-926-9083 | Atropine Injection | 500 per set |
| 6505-01-274-0951 | Diazepam Injection 5 mg/ml 2ml Syringe Needle Unit (Convulsant Antidote Nerve Agent - CANA) | 100 per set |
| 6505-01-125-3248 | Pralidoxime Chloride for Injection (2-PAM) | 50 per set |
| 6505-01-457-8901 | Antidote Treatment Kit - Cyanide (Cyanide Kit) | 5 per set |
| 6505-01-332-1281 | Atropine sulfate Inhalation Aerosol (MANAA) | 1 per set |
| 6505-01-454-2525 | Atropine Sulfate Ophthalmic Ointment | 24 per set |

TABLE 5-4. BLOWERS/ACCESSORIES FOR MES CHEMICAL AGENT PATIENT TREATMENT, LIN M23673

| NSN | ITEM | BASIS OF ISSUE |
|------------------|----------------------|----------------|
| 4240-01-442-2314 | Hose Assembly | 12 per set |
| 4240-01-442-8415 | Blower, Light Weight | 12 per set |
| 6130-01-500-9675 | Battery Charger | 1 per set |
| 6140-01-500-9672 | Rechargeable Battery | 24 per set |
| 6640-01-500-7717 | Cartridge Respirator | 48 per set |
| 6640-01-500-7721 | Indicator Airflow | 1 per set |

(3) Unit Funded. This program is for all other requirements that are unit/command funded, e.g., components of Medical Equipment Sets (non-MES Chem Patient Treatment), Rapid Response Teams; Chemical Accident/Incident Response Assistance (CAIRA) and Civil Support Teams. The majority of the MCBRNDM items are service regulated [Acquisition Advice Code (AAC) A or R] and require special processing procedures.

5-2. ACCOUNTABILITY FOR DFP

- a. SSA/MTF will maintain an audit trail for all assets.
- b. The SSA/MTF will retain accountability in the Theater Army Medical Materiel Information Systems (TAMMIS)/Defense Medical Logistics Supply Systems (DMLSS) using project code "DH1" for all DFP assets.
- c. At a minimum, the SSA/MTF will provide monthly reports of all centrally managed assets by the 5th of each month. Please note that updated inventory reports

are required to be submitted within 24 hours of any change of inventory (i.e., receipt of assets/issue of assets/change in condition code). Reports are to be sent via telefax (DSN 343-4404 or Commercial 301-619-4404) to the USAMMA, ATTN: MCMR-MMS-M, or reports can be emailed to the USAMMA MCBRNDM POC.

d. A chain of custody will be maintained from the SSA/MTF to the Unit to the Individual Service Member. This chain will be reversed when the unit redeploys or the mission ends.

(1) Any loss of accountability for CANA will require an investigation.

(2) Units/individuals have 15 days upon redeployment (if assets are not turned-in prior to leaving theater/return to home station) or termination of the mission to turn-in assets to their Medical Logistics Storage Activity.

e. Turn in of assets will be accomplished via Request for Issue and Turn In (DA Form 3161, or equivalent form). Separate forms will be provided for each category of materiel, serviceable, unserviceable, and questionable. Assets that were issued to ISMs will be segregated from assets that were retained under unit control. A roster will be provided for all assets issued to individuals, reflecting the name, quantity, and date/time when assets were released and returned, if applicable. Assets that were issued to ISMs are considered unserviceable and will be turned in for destruction. Assets that were maintained in central management by the units (not issued to individuals) and stored correctly will be returned to stock, unless theater or command policy specifies otherwise. Assets that were maintained in central storage (not issued to individuals) and the storage conditions/temperatures are unknown or were outside the controlled room temperature of 59-86 degrees Fahrenheit must be reported to the USAMMA, MCMR-MMS-M, DSN 343-4306 or Commercial 301-619-4306 for disposition instructions. Units must advise how assets were stored so the appropriate decision can be made on serviceability of assets. Above does not apply to Pyridostigmine Bromide Tablets (PBT); see paragraph 5-7.b.

f. The command may choose to issue the publications of *Antidote Treatment - Nerve Agent Antidote (ATNAA)/Antidote Treatment Kit Nerve Agent (Mark I Kits)* and *Guides to the Individual Service Members*. However, the CANA, antibiotics and radiological protectants and therapeutics will remain under unit control until the Combatant Command authorizes release/distribution. Pyridostigmine Bromide Tablets (PBT), Skin Reduction Paste Against Chemical Warfare Agents (SERPACWA), and Potassium Iodide will only be released when authorized by OTSG.

g. **IMPORTANT INFORMATION:** The SSA/MTF will provide the USAMMA a copy of all release documents annotated with the document number, unit designation, quantity, lot numbers and expiration dates for assets released within 24 hours of the next business day. Additionally, the storage locations will provide an updated inventory to the USAMMA with the release document.

5-3 ACCOUNTABILITY FOR POTENCY & DATED (P&D) MCBRNDM IN MES CHEMICAL AGENT PATIENT TREATMENT, LINE ITEM NUMBER (LIN) M23673

- a. SSA/MTF will maintain an audit trail all assets.
- b. The SSA/MTF will retain accountability in TAMMIS/DMLSS using project code "DH5" for all MES M23673 centrally managed assets.
- c. At a minimum, the SSA/MTF will provide monthly reports of all centrally managed assets by the 5th of each month. Please note that updated inventory reports are required to be submitted within 24 hours of any change of inventory, i.e. receipt of assets/issue of assets/change in condition code. Reports are to be sent via telefax (DSN 343-4404 or Commercial 301-619-4404) to the USAMMA, ATTN: MCMR-MMS-M; reports can also be emailed to the USAMMA MCBRNDM POC.
- d. A chain of custody will be maintained from the SSA/MTF to the Unit. This chain will be reversed when the unit redeploys or the mission ends.
 - (1) Any loss of accountability for CANA will require an investigation.
 - (2) A written document signed by the unit commander is required for any difference in quantity between what was issued and what was turned in.
 - (3) Units have 15 days upon redeployment (if assets are not turned in prior to leaving theater/return to home stations) or termination of the mission to turn-in assets in to their Medical Logistics Storage Activity.
 - (4) Units must turn in all P&D assets to supporting SSA/MTF and advise how assets were stored so the appropriate decision can be made on serviceability of assets. The assets and storage conditions will be reported to the USAMMA, MCMR-MMS-M, DSN 343-4306 or Commercial 301-619-4306.
- e. SSA/MTF will provide the USAMMA a copy of all release documents annotated with the document number, unit designation, quantity, lot numbers and expiration dates for assets released within 24 hours of the next business day. Additionally, the storage locations will provide an updated inventory to the USAMMA with the release document.

5-4. RELEASE PROCEDURES FOR DFP

- a. All requests for release of the centrally funded MCBRNDM to Individual Service Members/units must be validated and approved by The Directorate of Health Care Operations, Office of The Surgeon General. Contact OTSG by calling:
 DSN 761-8052/8186, Commercial 703-681-8052/8186
 Toll free 1-866-677-2128, or
 by email at eoc.opns@otsg.amedd.army.mil.
- b. The Directorate of Health Care Operations (HCO) will only authorize release of the DFP assets based on deployment order, Temporary Change of Station Order (TCS), World Wide Individual Augmentation System (WWIAS) task number, or a message or letter giving the Unit a deployment mission requiring MCBRNDM.

c. Units will request release of MCBRNDM through their SSA/MTF. The SSA/MTF will forward the Unit's request by email to **EOC.OPNS@otsg.amedd.army.mil** and include the following information:

(1) Subject of the email must include "MCBRNDM" along with abbreviated Unit name and number of personnel (PAX), e.g., "Request MCBRNDM Release for XXX (unit number) Ordnance BN, XX (personnel) PAX."

(2) Body of the email must contain ALL of the following items listed in a through j:

- (a) Unit Name and UIC
- (b) Installation
- (c) Number of PAX
- (d) Number of PAX on flight status
- (e) Date Materiel is required for personnel to deploy
- (f) Number of working dogs
- (g) Unit Order Number, TCS, or WSAIS number
- (h) Name and title of the Point of Contact
- (i) DSN Phone Number
- (j) Email address

d. The Directorate of Health Care Operations will respond to the SSA/MTF request by email to approve, disapprove, or request additional information.

e. SSA/MTF will issue MCBRNDM items listed in Table 5-2 (see page 5-2) upon receipt of approval notification from Directorate of Health Care Operations. SERPACWA and Pyridoxitigmine Bromide tablets will not be issued without express authorization from OTSG.

f. Potassium Iodide (NSN 6505-01-496-4961) is part of the DFP program, but distribution is limited to select locations. Directorate of Health Care Operations will authorize release of this materiel in support of select missions. Basis of Issue will be one (1) strip package (14 tabs) per individual.

g. Working dogs are authorized the release of the autoinjectors and antibiotics, i.e., ATNAA/Mark I Kits, CANA and antibiotic.

h. Doxy will be issued unless specific requirement exists for Cipro. Persons on flight status will be issued Doxy.

i. In order to ensure most efficient use of all assets, SSA/MTF will check all deployment orders to assess length of tour. If length of tour is specified, then utilize the shortest shelf life materiel that will meet the entire length of tour. If deployment orders do not indicate length of tour, then provide ISM with a minimum of 12 months remaining in shelf life.

5-5. RELEASE PROCEDURES FOR THE MES, CHEMICAL AGENT PATIENT TREATMENT PUSH PACKAGES

The potency and dated (P&D) items centrally procured for the MES, Chemical Agent Patient Treatment, LIN M23673, can be released to deploying units after the SSAS/MTFS

has validated the authorization requirement and the unit has received deployments orders.

5-6. REQUESTING MCBRNDM PROGRAM EXCLUSIONS

a. Funded requisitions can be submitted thru normal supply channels to USAMMA. However, the SSA/MTF must provide the necessary exception data (Unit Identification Code (UIC) and the reason for the order) via email to the USAMMA MCBRNDM POC or fax the data to DSN 343-4404/Commercial 301-619-4404. Detailed data is required, for example, if an item is a component of an MES then the LIN of the set and the number of MES on-hand must be provided so that the requisition can be validated and forwarded to the DSCP for processing.

b. Requests for AAC A or R items that cannot be validated by USAMMA based on authorized MESs will be forwarded to Health Care Operations, OTSG, for approval. Units must submit a written request through command channels providing the below data. OTSG will advise if requirement falls within the centrally managed program or if it will be unit/command funded. Requests will be valid for a period of five years. Requisitions must be faxed to the USAMMA at DSN 343-4404 or commercial 301-619-4404 and be identified as being approved under an exception letter. Required information:

(1) Mission authorization that requires issue of MCBRNDM. Attach a copy of the mission authorization, if possible.

(2) Quantity, description, and NSN of the MCBRNDM being requested.

(3) Certification that there is appropriate storage and security for the materiel at the location.

(4) Name of Medical Logistics Storage Activity to where materiel will be sent.

5-7. PYRIDOSTIGMINE BROMIDE TABLETS

a. The FDA approved this item as a pretreatment against Soman Nerve Agent Poisoning on 5 February 2003. Prior to this time the item was distributed to select locations for storage as an Investigational New Drug (IND). The FDA is permitting DoD to issue its existing assets of PBT tablets without repackaging or over-labeling so long as each packet is accompanied with the new, approved labeling. The FDA also required that all personnel be properly trained in the history, use, drug action and side effects of the PBT. Most urgent, is the requirement to provide adequate training and information to deploying service members, and ensure documentation and maintenance of records of all personnel receiving PBT, through hard copy records or electronic means. The DoD made a commitment to the FDA that all military services will provide each person receiving PBT tablets a new patient package insert (PPI) providing details about the approval of PBT tablets and its safe use. All assets of the IND materiel must be removed from the DoD inventory by February 2008. This will allow time for the services to budget the required funding to obtain newly manufactured product.

b. All PBT requiring destruction will be reported to USAMMA, MCMR-MMS-M, and DSN 343-4306 or commercial 301-619-4306. The USAMMA will coordinate the destruction of assets and ensure a Certificate of Destruction is obtained.

c. OTSG approval is required before PBT can be released.

d. The IND product has a date of manufacturer and the FDA approved product has an expiration date.

5-8. STORAGE REQUIREMENTS

a. All autoinjectors (ATNAA/Mark I Kits, CANA, Atropine, and 2-PAM) require room temperature between 59-86 degrees Fahrenheit. Keep from freezing. Additionally, CANA is a controlled substance (note Q) that requires vault or cage storage.

b. PBT requires refrigerated storage, 36-46 degrees Fahrenheit. Potency loss rapidly increases when PBT is exposed to temperatures above the refrigerated range. PBT can be out of refrigeration for a cumulative period of 6 months. However, when PBT is authorized for release, it has to have a minimum of 90 days time out of refrigeration. PBT issued to individuals has to be used (if directed by Combatant Commander) or destroyed 90 days after issue.

c. Antibiotics (Cipro/Doxy) require controlled room temperature between 59-86 degrees Fahrenheit.

d. Soldier Guides (booklet) require general warehouse storage.

e. SERPACWA requires storage at 68-86 degrees Fahrenheit.

f. Potassium Iodide tablets require controlled room temperature between 59-86 degrees Fahrenheit.

g. The Cyanide Kits, MANAA, and Atropine Ophthalmic Ointment require storage at 59-89 degrees Fahrenheit.

h. The storage requirements are reflected on the items; additional storage data can be found in the notes codes of the automated logistics products:

Universal Data Repository (UDR)

Federal Logistics Data on Compact Disc (FEDLOG), and

Medical Services Information Logistics Systems (MEDSILS)

5-9. RELABELLING OF MCBRNDM ITEMS

a. The Army's policy is that extended materiel will be re-labeled IAW the Food & Drug Administration (FDA) requirements. Army unit/SSAS/MRFS must contact Army Shelf Life Extension Program (SLEP) manager in order to obtain further guidance and/or labels.

(1) NSN 6505-01-174-9919, Antidote Treatment Kit Nerve Agent (NAAK or MARK I Kit)

(2) NSN 6505-01-362-7427, Antidote Treatment – Nerve Agent Autoinjector (ATNAA)

(3) NSN 6505-00-926-9083, Atropine Inj Aqueous Type 0.7 ml Syr w/Ndl

(4) NSN 6505-01-125-3248, Pralidoxime Chloride Auto Inj (2-Pam Chloride)

(5) NSN 6505-01-274-0951, Diazepam Inj USP, Syr-Ndl Unit (CANA)

b. Once directed by OTSG to relabeling, all products received and subsequently issued by the Services must be labeled in compliance with the Federal Food, Drug and Cosmetic (FD&C) Act of 1938 and the Food and Drug Modernization Act (FDMA) of 1997. The FDA has authorized a deferral of the requirement to have every individual unit of issue relabeled only while the materiel is maintained under centralized control. This was requested in order to reduce the cost for multiple relabeling efforts, as SLEP products may be extended multiple times prior to being issued to individual service members. The FDA will permit DoD to label only the outer cartons of products with the updated information so long as they remain in centralized storage, control, and management. This materiel must be relabeled completely, down to the individual units of issue, before being distributed/issued to forward units or individual service member.

c. Activities with materiel that has been extended through the SLEP, must contact the USAMMA SLEP manager in order to obtain further guidance and/or labels, prior to any extension. Activities will comply with the SLEP message instructions.

5-10. ADDITIONAL INFORMATION

a. Chapter 9, *AR 40-61*, provides policy for the centrally managed MCBRNDM.

b. USAMMA web site (<http://www.USAMMA.army.mil>). OTSG will disseminate policy guidance via MMI messages. Other required data may be disseminated via DoD MMQC messages. Website contains informational papers and SLEP guidance relative to MCBRNDM.

c. MEDCOM distributes guidance via Operations Management bulletins.

d. Additional information relative to policy/guidance can be directed to:

Office of The Surgeon General
ATTN: DASG-HCF (CBRN)
5111 Leesburg Pike, Suite 401A
Falls Church VA 22041-3258
Telephone DSN 761-8185/8188/4201 or
Commercial 703-681-8185/8188/4201

e. Additional information relative to assets management/SLEP can be directed to:

USAMMA
ATTN: MCMR-MMS-M
1423 Sultan Drive, Suite 100
Fort Detrick MD 21702-5001
Telephone DSN 343-4306/4428 or
Commercial 301-619-4306/4428